

PART B - ISSUE FEE (S) TRANSMITTAL

Complete and mail this form, together with applicable fees, to:

**Box ISSUE FEE
Commissioner for Patents
PO Box 1450 Alexandria, VA 22313-1450**

MAILING INSTRUCTIONS. This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the (a), (b) and (c) sections of this form should be mailed to the same correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a separate FEE ADDRESS for mailing of fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

REED SMITH LLP
SUITE 1400
3110 FAIRVIEW PARK DRIVE
FALLS CHURCH, VA 22042



Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate.

Certificate of Mailing

I hereby certify that this Issue Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/849,516	05/20/2004	Hiromasa Takashashi	HIRA.0149	7135

TITLE OF INVENTION: MAGNETIC SENSOR AND MAGNETIC HEAD WITH THE MAGNETIC SENSOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	08/21/2007

EXAMINER	ART UNIT	CLASS - SUBCLASS
MILLER, Brian E.	2627	360-324100

1. Change of correspondence address or indication of "Fee Address" (37 CFR §1.363). Use of PTO form(s) and Customer Number are recommended, but not required

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122 attached)

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent documents, list (1) the name of up to 3 registered patent attorneys or agents OR, Alternatively, (2) the name of a single firm (have as a member a registered attorney or agent) and the name of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed

Reed Smith LLP

Stanley P. Fisher, Esq.

Juan Carlos A. Marquez, Esq.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Hitachi, Ltd.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tokyo, Japan

Please check the appropriate assignee category (will not be printed on the patent)

individual

Corporation or private group entity

government

4a. The following fees are enclosed:

Issue fee

Publication fee

Advance Order - # of Copies: 3

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-1480 (enclose an extra copy of this form).

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) to the application identified above.

(Authorized Signature)

(Date) August 16, 2007

Stanley P. Fisher Reg. No. 24,344

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered patent attorney or agent, or the assignee, or other party in interest, as shown by the records of the Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, United States Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington, D.C. 20231

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number

08/17/2007 R:91454F2 60003089 10845 ...

01 815051
02 141523
03 141521

1 00 00
1 00 00
1 00 00

TRANSMIT THIS FORM WITH FEE(S)

Page 2 of 3

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE